1407752



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response 16.00

SEC USE ONLY							
Prefix		Serial					
DA	DATE RECEIVED						
	!						

Name of Offering Check if this is an amendment and name has changed, and indicate change.)	PTION		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	_ nr oe		
A. BASIC IDENTIFICATION DATA			
1. Enter the information requested about the issuer			
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	07073234		
Ivy Capital 4. f.			
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
241 Oak Road, Santa Barbara, CA 93108	212-346-2235		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)		
Brief Description of Business			
Limited Partnership Trading Securities for Its Own Account	DD00-		
Type of Business Organization corporation Iimited partnership, already formed other (pl	ease specify):		
business trust limited partnership, to be formed	AUG 0 6 2003		
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: 12 05 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	lease specify): AUG 0 6 2007 THOMSON FINANCIAL		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and r	nanaging partner o	of partnership issuers.	. 0		•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Ivy Advisors, LLC					ividing rainer
Full Name (Last name first,	if individual)				
241 Oak Road, Santa Barbara		a a a a			
Business or Residence Addi	ess (Number and)	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Doron Linz Full Name (Last name first,	if individual)				
241 Oak Road, Santa Barbara	CA 93108				
Business or Residence Addi		Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addi	ess (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				•
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		• 11-		
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)		W
	/I ta - 1-1-	1. 1	alakin nation nation nation in		

•					B. INFO	ORMATIC	ON ABOU	T OFFER	ING				
1.	Has the	issuer sol	d. or does t	he issuer ir	ntend to se	ll. to non-	accredited	investors i	in this offe	ering?		Yes	No
••	1145 (110	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Ш	K
2.	What is the minimum investment that will be accepted from any individual?									\$ 500,0	00.00		
_												Yes	No
3.			permit joint									⊠	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		Last name	first, if indi	vidual)	,				_				
NA Bus		Residence	Address (N	umber and	Street, Cit	ly State 7	in Code)						
200	3.11633 01	residence	7 Iddie 55 (11	umber and		.,, State, 12	p co uc ,		_				
Nar	me of Ass	sociated Bi	oker or Dea	aler	·								
Sta	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit I	Purchasers					- :	
	(Check	"All States	" or check i	individual S	States)	••••••	*************		··-			. 🗌 Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL .	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	RI	NE SC	SD	[NH]	TX	UT	NY VT	NC VA	ND WA	OH]	OK WI	OR WY	PA
		L SC	30		17	[01]				***	WI		
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	Number and	l Street, C	ity, State, 2	Zip Code)						
Naı	me of As	sociated B	roker or De	aler							·	а	
Sta	ites in Wi	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)							☐ Al	I States
	AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	HI	ID
	IL	IN	lA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	[wv]	<u>WI</u>	WY	PR
Ful	II Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	Number and	Street, C	ity, State, 2	Zip Code)						
Na	me of As	sociated B	roker or De	aler					 -				
Sta	ites in Wi	nich Person	n Listed Has	s Solicited	or Intends	to Solicit	Purchasers		 				
544			s" or check							••••••		☐ AI	II States
	AL	AK	AZ	AR	CA	СО	CT	DE	DC	FL	GA	НІ	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	[wv]	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregat Offering Pr		Α	mount Already Sold
	Debt	s		s_	
	Equity	s		s	
	Common Preferred				
	Convertible Securities (including warrants)	s		s	
	Partnership Interests	00,000,001_2	0.00	S	5,500,000.00
	Other (Specify)	s		s	
	Total			S	5,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Number Investor			Aggregate Dollar Amount of Purchases
	Accredited Investors		2	\$_	5,500,000.00
	Non-accredited Investors		0	S _	0.00
	Total (for filings under Rule 504 only)		0	S _	0.00
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security		ı	Dollar Amoun Sold
	Rule 505		0	_s_	0.00
	Regulation A	· · · · · · · · · · · · · · · · · · ·	0	s _	0,00
	Rule 504		0	S _	0.00
	Total		0	S	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs		\boxtimes	\$	1,000.00
	Legal Fees		\boxtimes	<u>\$</u>	12,500.00
	Accounting Fees		X	\$	10,000.00
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			<u>\$</u>	
	Other Expenses (identify)			\$	
	Total	•••••		<u>\$_</u>	23,500.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	**************************************
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—c proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$ 99,976,500.00
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		s	s
	Purchase of real estate	[S
	Purchase, rental or leasing and installation of mac and equipment			
	Construction or leasing of plant buildings and fac	cilities [s	s
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another] s	s
	Repayment of indebtedness		s	□ s
	Working capital			s
	Other (specify): Working Capital Available for Trading	g [s	\$ 99,976,500.00
				s
	Column Totals	[s	\$ 99,976,500.00
	Total Payments Listed (column totals added)		∑ \$_99	9,976,500.00
		D. FEDERAL SIGNATURE		
sigi	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur nformation furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Commis	sion, upon writter	
Issu	er (Print or Type)	Signature · A	Date	
Ivv	Capital L, Pa	1 2.4	June 15, 2007	
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	on Linz	Managing Member of the General Partner		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE								
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No						
	See Appendix, Column 5, for state response.								

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature A Q > 0	Date
Name (Print or Type)	Title (Print or Type)	June 15, 2007
Doron Linz	Managing Member of the General Partner	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPI	ENDIX					
	Intend to non-a investor	I to sell ccredited s in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		_ ×_	LP Interests - \$100,000,000							
AK		×	LP Interests - \$100,000,000							
AZ		X	LP Interests - \$100,000,000							
AR		X	LP Interests - \$100,000,000							
CA		×	LP Interests - \$100,000,000	1	\$500,000.00	0	\$0.00		×	
СО		X	LP Interests - \$100,000,000							
СТ		X	LP Interests - \$100,000,000							
DE		×	LP Interests - \$100,000,000							
DC		×	LP Interests - \$100,000,000							
FL		×	LP Interests - \$100,000,000							
GA		×	LP Interests - \$100,000,000			.,				
н		×	LP Interests - \$100,000,000							
ID		×	LP interests - \$100,000,000							
IL	<u>-</u>	×	LP Interests - \$100,000,000							
IN		X	LP Interests - \$100,000,000							
IA		X	LP Interests - \$100,000,000							
KS		×	LP Interests - \$100,000,000							
KY		×	LP Interests - \$100,000,000							
LA		×	LP Interests - \$100,000,000		_					
ME		×	LP Interests - \$100,000,000							
MD		X	LP Interests - \$100,000,000							
МА		×	LP Interests - \$100,000,000			:				
MI		×	LP Interests - \$100,000,000							
MN	_	×	LP Interests - \$100,000,000							
MS		×	LP Interests - \$100,000,000					<u> </u>		

A	P	P	F	N	n	ΙX	•
~			1.4		.,	10	١.

l		2	3			4		5 Disqualification		
	to non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		×	LP Interests - \$100,000,000							
МТ		×	LP Interests - \$100,000,000	-						
NE		×	LP Interests - \$100,000,000							
NV		×	LP Interests - \$100,000,000							
NH		×	LP Interests - \$100,000,000							
NJ		X	LP Interests - \$100,000,000							
NM		X	LP Interests - \$100,000,000							
NY		×	LP Interests - \$100,000,000							
NC		×	LP Interests - \$100,000,000				-			
ND		X	LP Interests - \$100,000,000							
ОН		×	LP Interests - \$100,000,000							
ок		×	LP Interests - \$100,000,000							
OR		X	LP Interests - \$100,000,000							
PA		×	LP Interests - \$100,000,000							
RI		×	LP Interests - \$100,000,000							
SC		X	LP Interests - \$100,000,000							
SD		×	LP Interests - \$100,000,000							
TN		X	LP Interests - \$100,000,000							
TX		X	LP Interests - \$100,000,000							
UT		×	LP Interests - \$100,000,000							
VT		×	LP Interests - \$100,000,000		-					
VA	_	X	LP Interests - \$100,000,000							
WA		×	LP Interests - \$100,000,000	I	\$5,000,000.0 0	0	\$0.00		×	
wv		×	LP Interests - \$100,000,000							
WI		×	LP Interests - \$100,000,000							

				APPE	ENDIX					
1	Intend	2 I to sell	3 Type of security and aggregate	4					ification ate ULOE	
	to non-a	eccredited es in State s-Item 1)	offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		×	LP Interests - \$100,000,000							
PR		×	LP Interests - \$100,000,000							

